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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/766,519		Filing Date 01/28/2004		☐ To be Mailed	
APPLICATION AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
	FOR	N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b), (c)	or (c))	N/A		N/A		N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i), c	or (m)) .	N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p), o		N/A		N/A		N/A	·		N/A		
	TAL CLAIMS CFR 1.18(i))		minus 20 =				x \$ =		OR	x \$ =		
	EPENDENT CLAIM CFR 1.16(h))		minus 3 =				x \$ =			x \$ =		
	APPLICATION SIZE (37 CFR 1.18(s))	FEE shee is \$2 addit	ts of pape 50 (\$125 ional 50 s	er, the applic for small en sheets or fra	wings exceed 10 cation size fee dutity) for each ction thereof. See 37 CFR 1.16(s).	9		·				
Ш	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If the difference in column 1 is less than zero, enter *0" in column 2.							TOTAL		1	TOTAL		
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT	11/13/2006	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	PRESENT LY EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.18(1))	· 20	Minus	- 20	= 0		x \$ =		OR	X \$50=	. 0	
	Independent (37 CFR 1.18(h))	• 4	Minus	***3	= 1	_	_X \$ =		OR	X \$200=	200	
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	200	
		(Column 1)		(Column 2								
ENT	9/2714	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOI	R PRESENT SLY EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,18(1))	· 22	Minus	-20	= /	1	X\$ =	(1)	OR	x.50=	50.0	
	Independent (37 CFR 1.16(h))	. 4	Minus	··· U	=		x \$ =		OR	x \$ =	3017	
AMENDA	Application Size Fee (37 CFR 1.16(s))					1			1			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

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